## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # G96115

1. Entity Name

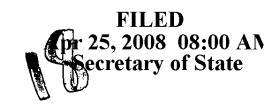
THE GRATE FIREPLACE & STONE SHOPPE, INC.



Principal Place of Business

Mailing Address

16611 SOUTH TAMIAMI TRAIL FORT MYERS, FL 33908 16611 SOUTH TAMIAMI TRAIL FORT MYERS, FL 33908





03212008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2390106

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STASKO, WILLIAM J. 16611 SOUTH TAMIAMI TRAIL FT. MYERS, FL 33908

## DO NOT WRITE IN THIS SPACE

| FI. MTERS, FL 33906   |  |  | IN THIS SPACE |                                |   |
|---|--|--|---------------|--------------------------------|---|
| 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. |  |  |               |                                |   |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE   |  |  |               |                                |   |
| FILE NOWIII FEE IS \$150.00<br>After May 1, 2008 Fee will be \$550.00   |  | 9. Election Campaign Financing \$5.00 May Be Added to Fees |               | \$5.00 May Be<br>Added to Fees | U00000922303<br>05/15/08-80042-005 150.00 |
| 10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP   | OFFICERS AND DIRECT<br>PD<br>STASKO, WILLIAM J.<br>17576 TAYLOR DRIVE, S.W.<br>FT. MYERS, FL 33908 | CHUI   |               |                                |   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | SD<br>STASKO, HELYN R.<br>17576 TAYLOR DRIVE, S.W.<br>FT. MYERS. FL 33908                          |  |               |                                |   |
| TITLE NAME STREET ADDRESS CITY+ST+ZIP   | VP<br>KEY, DIANE M<br>17584 TAYLOR DR SW<br>FORT MYERS, FL 33908                                   |  | DO NOT WRITE  |                                |   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | T<br>KEY, DIANE M<br>17584 TAYLOR DR SW<br>FORT MYERS, FL 33908                                    |  | IN THIS SPACE |                                |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |  |  |               |                                |   |
| TITLE NAME STREET ADDRESS   |  |  |               |                                |   |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an algorithm of the chapter 607 in the chap

SIGNATURE:

CITY-ST-ZIP

DINATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIREC

Stasko 04-04-08 239-939-718